

**PROPOSED RESOLUTIONS  
FROM THE STATE OF RHODE ISLAND  
TO  
THE WHITE HOUSE CONFERENCE ON AGING  
POLICY COMMITTEE**

**Submitted by the R.I. Department of Elderly Affairs  
October 1, 2005**

## **INTRODUCTORY STATEMENT**

**The Rhode Island Department of Elderly Affairs, in conjunction with the Office of the Governor, convened four Aging Agenda Events, in May and June, to provide opportunities for elders, disabled adults, and babyboomers, from every region of the state, to propose those issues that they feel should be the foremost priorities of a national public policy on aging for the next decade.**

**As a follow-up to these four events, the Department convened a Resolution Development Workshop at which interested stakeholders came together to further refine the priority issues and to generate resolutions for submission to the White House Conference on Aging Policy Committee for consideration as agenda items for the WHCOA. It was the feeling of the Workshop participants that these nine resolutions reflect aging issues that will affect the vast majority of the aging population and that, as such, they have broad implications for a national public policy on aging.**

## **RESOLUTION ONE**

**Priority Issue: Research supports the preference of seniors and disabled adults to remain independent in the community for as long as possible.**

**WHEREAS, the federal Medicaid system was designed, primarily, as a mechanism to fund facility-based long term care;**

**WHEREAS, a broad range of home and community-based services to address health care and social support needs is currently available:**

**WHEREAS, there is a general lack of awareness, on the part of the public, about available community-based services and financing options;**

**WHEREAS, the significant division between the medical community and the social service community leads to fragmentation in care coordination;**

**WHEREAS, Medicare provides limited coverage for home and community-based services;**

**BE IT RESOLVED, that a national public policy response would include the establishment of national standards for: Medicaid coverage of both facility-based and community-based services; long term care insurance portability; incentives for measurable excellence in care delivery; federal support for the research, development, and application of assistive technology; funding mechanisms to follow the elder through the long term care continuum so that there will be “no elder left behind;” an aggressive campaign to educate employers, caregivers, and the general public about community-based health care and social service options; and support for state/federal synergy to maximize initiatives and coordinate resources.**

## **RESOLUTION TWO**

**Priority Issue:** Support increased access to employment opportunities for the older worker in order to ensure economic independence, support ongoing socialization, and eliminate age discrimination.

**WHEREAS**, current institutional barriers prevent older workers from remaining in the workforce beyond prescribed age limits;

**WHEREAS**, many employers devalue the contributions that can be made by older workers;

**WHEREAS**, the years of peak productivity are also the time that employees begin to feel susceptible to age discrimination;

**WHEREAS**, although the U.S. has had an age-discrimination law since 1967, two-thirds of employers, surveyed in 2004, reported that they do not actively recruit older workers;

**BE IT RESOLVED**, that national public policy will encourage employers, through incentives: to hire and retrain older workers; to offer flexible work schedules for the experienced older worker; to allow older workers to buy into benefit packages; and to adopt attitudes, beginning at the leadership level, that value the expertise and experience offered by the older worker; and that public policy will support certain professions, such as education and health care, in their efforts to attract older workers through innovation and flexibility with regard to credentialing requirements, in order to fully utilize the talents, expertise, and experience of the older worker.

### **RESOLUTION THREE**

**Priority Issue: Seniors, caregivers, and babyboomers express a need for increased information, resources, and support for proactive and informed retirement and long term care planning.**

**WHEREAS**, the average individual has inadequate knowledge about financial literacy, estate planning, and long term care needs;

**WHEREAS**, decisions regarding long term care planning are often made quickly and under pressure;

**WHEREAS**, long term care insurance is perceived as expensive and unnecessary by many consumers who, therefore do not enroll;

**WHEREAS**, the traditional three-legged stool of retirement income-Social Security, savings, and pensions- is no longer relevant for today's **50-plus population**;

**BE IT RESOLVED**, that a national public policy to support planning for retirement and for long term care needs will include: tax incentives for caregivers who care for elders, for those who maintain long term care insurance and health insurance, and for those who invest in retirement savings plans; a national campaign to educate employees (before the age of 30) about the need for financial planning for retirement, including enrollment in health and long term care insurance; and the development of a federally sponsored long term care insurance plan.

## **RESOLUTION FOUR**

**Priority Issue:** Disparities in access to health care, benefits, and social services exist for diverse populations in Rhode Island and the nation. There is a need for a national public policy response to eliminate the inequalities that affect a growing elderly population within diverse communities.

**WHEREAS, the National Healthcare Disparities Report found that inequality in quality exists for diverse populations;**

**WHEREAS, opportunities to provide preventive care to minorities are frequently missed;**

**WHEREAS, the burden of many chronic diseases and conditions-especially hypertension, diabetes, and cancer-varies widely by race and ethnicity;**

**WHEREAS, poorly managed care or missed diagnoses within minority populations often result avoidable complications and greater expense to the health care system;**

**BE IT RESOLVED, that a national public policy will support the establishment of an effective program of comprehensive care for diverse elders that will include; accessible and relevant education about prevention disseminated by diverse health care workers; accessible immunizations, screening, and treatments without regard to ability to pay; support of non-traditional ,culture-specific treatment; culturally sensitive end-of-life care; and a national initiative to require that cultural proficiency be included in basic medical education.**

## **RESOLUTION FIVE**

**Priority Issue: Caregiving and Care Coordination issues affect a significant segment of the Babyboom Generation, also called the “sandwich” generation because of their dual caregiving responsibilities to growing families and to aging parents. There is also an increasing demographic trend that includes grandparents who are caring for their grandchildren. The complex issues facing the spectrum of caregivers require an immediate and significant public policy response**

**WHEREAS**, family caregiving is at the core of what sustains frail elders and disabled adults;

**WHEREAS**, seventy-eight (78) per cent of adults who receive long term care at home rely exclusively on family and friends for assistance ;

**WHEREAS**, increased participation in the labor force has eliminated many women from caregiving roles;

**WHEREAS**, greater mobility and fewer multi-generational households results in increased “long distance” caregiving;

**BE IT RESOLVED**, that a national public policy will encourage a proactive approach to the “conversation” within families regarding the preferences and responsibilities of caregiving; that the Family Medical Leave Act (FMLA) will be mandated nationally for ALL workplaces; that caregivers will be supported through tax breaks and other financial incentives; and that services will be flexible, diverse, and designed to be more sensitive to the needs of caregivers.

## **RESOLUTION SIX**

**Priority Issue: Research supports the preference of seniors and disabled adults to remain independent in the community for as long as possible. Independence requires an ability to have access to transportation, whether it is driving oneself, relying on family, friends or other private drivers, or utilizing public transportation systems. As the shift toward community-based long term care progresses, the need for a responsive system of transportation options will increase accordingly.**

**WHEREAS, the ability to maintain oneself in the community may be dependent on one's ability to obtain necessary staples and to travel to medical offices for appointments;**

**WHEREAS, public systems of transportation are often inadequate and inflexible;**

**WHEREAS, aging babyboomers are likely to retire from the workforce at a more advanced age than their predecessors;**

**WHEREAS, the ability to leave one's home and remain engaged with the community contributes to overall physical and emotional health;**

**BE IT RESOLVED, that a national public policy to meet the needs of a growing senior population must include: flexibility and innovation in services and program design; adequate resources to support same day, urgent medical transportation; support of volunteer driver programs; the expansion of community options such as, delivery services, coordinated group trips to consumer destinations, private sponsorship of transportation to businesses/agencies for access to services; effective outreach and education about transportation options; improved coordination of existing public transit systems; and adequate federal funding to expand and improve transportation services to allow seniors to remain independent in the community.**



## **RESOLUTION SEVEN**

**Priority Issue:** While improved medical care and increased use of preventive health services during the 20<sup>th</sup> century have led to dramatic increases in life expectancy in the U.S., these same factors have led to a shift in the leading causes of death from infectious diseases and acute illnesses to chronic diseases and degenerative illnesses.

**WHEREAS**, smoking, poor diet, and physical activity often underlie the development of the nation's leading chronic diseases;

**WHEREAS**, currently, at least 80% of older Americans are living with one chronic condition and 50% have two;

**WHEREAS**, among older Americans, almost 95% of health care expenditure is for chronic diseases;

**WHEREAS**, 80% of individuals who live to age eighty-five (85) will have some symptoms of dementia;

**WHEREAS**, Alzheimer's Disease costs the nation more than \$50 billion each year in Medicare and Medicaid, a figure that is expected to increase by 54% by 2010 due to an increase in the aging population and to a correlative increase in disease prevalence;

**WHEREAS**, chronic disease often reduce the quality of life for seniors;

**WHEREAS**, Americans are a sedentary population;

**WHEREAS**, 80% of every health care dollar is spent on health care in the last month of life;

**BE IT RESOLVED**, that a national public policy must include: education about healthy lifestyles and prevention beginning in early childhood; government support of healthy lifestyles and chronic disease management through adequate coverage of prescription drugs, social and financial support for caregivers, subsidized gym memberships and other exercise opportunities, home adaptation (including air conditioners for individuals with chronic respiratory disease), an aggressive public education campaign on the financial and emotional effects of chronic and degenerative disease on the family, the community, and the workplace, and adequate funding of research to eliminate or control chronic and degenerative diseases.

## **RESOLUTION EIGHT**

**Priority Issue: Disabled adults are effective advocates for their right to participate as independent, active, and engaged members of their community. They face many challenges: transportation needs; workforce issues; chronic and degenerative illness; accessible housing, and the high cost of medications. A strong national public policy response is required to increase progressive options for independent living for this population.**

**WHEREAS, the growing market in assistive technology will enable increasing numbers of disabled adults to remain engaged and active within the community;**

**WHEREAS, discriminatory practices against adults with disabilities persist within the workplace;**

**WHEREAS, Medicaid cutbacks over the next ten years could dramatically reduce necessary supportive programs for independent living;**

**WHEREAS, a lack of adequate programs to assist with the high cost of pharmaceuticals creates significant financial hardship for disabled adults;**

**BE IT RESOLVED, that a federal Task Force will review and revise the standards of the Adults with Disabilities Act to more closely reflect the current needs of disabled adults; that the ADA standards will be more aggressively publicized and promoted within the workplace to change workforce attitudes and to support employment opportunities for disabled adults; and that there will be adequate funding and financial incentives to provide for an increase in the installation of home modifications, in assistive technology, universal design, product development, and in other supportive services.**

## **RESOLUTION NINE**

**Priority Issue: Research supports the preference of seniors and disabled adults to remain independent in the community for as long as possible. Public policy to address housing needs for these populations will directly affect their ability to successfully “age in place.”**

**WHEREAS**, housing options must include affordability and accessibility for seniors and disabled adults;

**WHEREAS**, accessible community resources must be available for people as they progress through the stages of aging in place;

**WHEREAS**, the high rate of mobility within American families leaves many seniors and disabled adults without consistent family support;

**WHEREAS**, the movement of elders and disabled adults to suburban communities has reduced easy access to health and social services, particularly if transportation is not readily available;

**BE IT RESOLVED**, that a public policy response to housing needs for the next three decades will include: education of caregivers and babyboomers about housing options and the need for long term financial planning to meet future housing needs; and community development that includes incentives for: universal design to support “aging in place;” proximity to services, transportation, and health care; and a commitment to aesthetics and opportunities for social interaction.

